## How to Complete the Authorization for Direct Deposit

At the top of the page print your name and phone extension. The effective date is to indicate a future date other than the next available pay date and is optional. Sign and date the form at the bottom of the page. Complete the other information as instructed below and be sure to use the correct bank ACH R/T numbers (see example below) and account numbers – phone your financial institution for assistance with these if needed. PLEASE FORWARD COMPLETED FORM TO PAYROLL -- MAIL CODE "FIN" and do not attach deposit slips or voided checks.

The ACH R/T number will be located on most checks just below the bank institution's name on the bottom left corner of the check.	Your Name 1001 1234 Oak Anytown, USA 20 ***********************************	
	DOLLARS Bank of America ACH R/T987654321 FOR	
	ABA Check Routing Number Account Number L234, 56 789* L001 ABA Check Routing Number L234, 56 789* L001 ABA Check Number L234, 56 789* L001 987654321	

#### <mark>NET PAY</mark>

# \*\*\*PLEASE NOTE: If you have your net pay issued to you via direct deposit, you will have all employee expense reimbursements paid to you by direct deposit to this same account by Accounts Payable.\*\*\*

If you are signing up for direct deposit of net pay for the first time or you are changing banks or accounts for net pay, check the "Start" box. New information you provide for net pay deposit replaces current information. Therefore, you only need to check the "Stop" box when you want to receive checks instead of direct deposits for net pay.

Complete the bank name, ACH R/T number and Account number in the appropriate space for checking or savings.

#### Other Accounts

Check the box in front of the action you want to perform - start, stop, or change amount.

Print the name of your bank or credit union in the space provided. Write the bank's ACH R/T number in the boxes provided.

Fill in the Account Number(s) and put an "X" in the appropriate box in front of Checking or Savings.

For starts and changes fill in the **total amount to deposit to this account for each biweekly pay period**. For stops fill in the amount currently being deposited each pay period. Repeat these steps if you are making the same type of change to another account at the same financial institution.

If you are making a different type of change or a change at a different financial institution, use the next block of fields as described above. Please use one information block to **Stop Direct Deposit** at your old bank or credit union. Use the second information block to **Start Direct Deposit** at your new bank or credit union.

#### Timesaving Tips

If you are not changing your net pay deposit, there is no need to give this information-we already have it.

**If stopping deposit on other accounts,** you do not need to give the bank's ACH R/T number or amount per pay period.

When changing only the amount of a deposit, you do not need to give the bank ACH R/T number.

## Southwest Florida Water Management District AUTHORIZATION FOR DIRECT DEPOSIT

### \*\*\* PLEASE READ REVERSE SIDE FOR INSTRUCTIONS ON COMPLETING THIS FORM \*\*\*

Name:	P	hone Ext.:	Effective Date:/				
(Please Print)			(Pay Period En	•			
**PLEASE NOTE: If you have your net pa		· · · · · · · · · · · · · · · · · · ·					
expense reimbursements paid to you by c	arect depos	sit to this same	account by Accounts Payable.""				
INDICATE ONE OPTION for <u>NET PAY</u> (Balance After Taxes, Deductions, and Other Deposits)	<mark>(</mark> :	[] START	[] STOP				
Since there is only one place to set up net pay in the payroll system, any "Start" information will override previous information. Therefore, you do not need to "Stop" net pay deposit if you are making a change.							
Name of Bank or Credit Union:							
ACH R/T Number (see example on back): (ACH Routing/Transit Number)							
Checking Acct Number:		Savings Acct	Number:				
INDICATE ONE OPTION for other act	<mark>counts</mark> :	[]START	[] STOP [] CHANGE AMO	UNT			
Name of Bank or Credit Union:							
ACH R/T Number (see example on back): (ACH Routing/Transit Number)							
Account Number:	🗆 Checking	g 🛛 🗆 Savings	New Total per pay period \$_				
Account Number:	🗆 Checking	g 🛛 🗆 Savings	New Total per pay period \$_				
INDICATE ONE OPTION for other act	<mark>counts</mark> :	[]START	[] STOP [] CHANGE AMO	UNT			
Name of Bank or Credit Union:							
ACH R/T Number (see example on back): (ACH Routing/Transit Number)							
Account Number:	🗆 Checking	g 🛛 🗆 Savings	New Total per pay period \$_				
Account Number:	🗆 Checking	g 🛛 🗆 Savings	New Total per pay period \$_				
BENEFICIARY DESIGNATION for final paycheck:							
In case of death make my final paycheck payable to this beneficiary:							
Name:	ame: Relationship:						

I authorize Southwest Florida Water Management District to make deposits based on the information provided. By electing direct deposit, I release the District from any liability for transfer errors, financial institution errors and from the results of transactions between the financial institution and myself. If there is an error made in my pay, I authorize the District to debit or credit my account for the amount of that error.

This Authorization remains in effect until Southwest Florida Water Management District receives a new Authorization for Direct Deposit reflecting a change or cancellation in such a time and manner as to afford the District and my financial institution reasonable opportunity to act on it. I recognize that it is my responsibility to verify with my financial institution the availability of my money after my paycheck has been issued and to verify my account balance prior to drawing on my account.

SIGNATURE: